

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL096003</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/24/2016</b>
NAME OF PROVIDER OR SUPPLIER  <b>WAYNE COUNTY REST VILLA NO. 1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>305 VANCE STREET FREMONT, NC 27830</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments  This is a Report of a Biennial Construction Survey done by Bob Getchell on August 24, 2016.  This facility was first licensed as a Home for the Aged serving 12 residents on March 1, 1982. Therefore, the facility must meet the 1977 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds, and, the 1978 North Carolina State Building Code Section 409- Institutional Occupancy.  Deficiencies were noted and a Plan of Correction is required.	C 000		
C 155	Floors-Non-skid, in Good Repair  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (i) The requirements for floors are: (1) All floors shall be of smooth, non-skid material and so constructed as to be easily cleanable; (2) Scatter or throw rugs shall not be used; and (3) All floors shall be kept in good repair.  This Rule is not met as evidenced by: 1. Based on observation, the facility floors were not maintained clean.  Findings include:  a) Throughout the building the floor in bedroom corners, closets and around door frames are dirty.	C 155		
C 164	Housekeeping and Furnishings-Clean, Repaired	C 164		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 164	Continued From page 1  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Based on observation, the resident furnishings in bedrooms and other areas were not maintained in good condition.  Findings include: a) Room 1 has furniture with a drawer missing.	C 164		
C 189	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.  This Rule is not met as evidenced by: 1. Based on observation, the facility components were not maintained operable by having doors that did not close completely and latch.  Findings include:	C 189		

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C 189	<p>Continued From page 2</p> <p>The following doors have issues: a) Room 1 door is scrubbing the frame, b) Room 6 door is scrubbing the frame c) Living Room door will not close and latch.</p> <p>2. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would affect all residents by not containing smoke and fire in the room or smoke compartment of origin.</p> <p>Findings include:</p> <p>a) The corridor ceiling has unprotected penetrations by wire next to the camera installations. b) A hole in the corridor wall at the Womens bathroom near room 4 has been patched with a piece of 1/4 gypsum instead of 5/8.</p> <p>These unprotected openings are not in conformance with the requirement to use a through penetration fire stop system that has been tested in accordance with ASTM E-814.</p> <p>3. Based on observation, the building emergency illumination was not maintained in a safe manner. This would affect all residents by not keeping the exits visible in an emergency.</p> <p>Findings include:</p> <p>Emergency lights are not working in the following locations: a) Emergency Light out at room 1, b) Emergency light out at Dining Room c) Emergency Lighty out at room 5,</p>	C 189		

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C 189	Continued From page 3  4. Based on observation, the building plumbing equipment was not maintained operable. This could expose residents to a slip and fall hazard.  Findings include: a) The handicapped bathroom has a toilet coming loose from the floor.	C 189		